## POLITICAL CONTRIBUTIONS PRIOR

Due October 18-22, 2021

Candidate Name: Kath leen	MOVISON
Address: 22 Hill 5t.	
Phone Number: 63-205+4	23'1
Phone Number:	Board at Large
Contributor:	Contributor:
Name:	Name:
Address:	Address:
Amount contributed:	Amount contributed:
Contributor:	<u>Contributor:</u>
Name:	Name:
Address:	Address:
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Name:	Name:
Address:	Address:
Amount contributed:	Amount contributed:
TOTAL:	
FISCAL ACENT NAME:	S Hart Signature
FISCAL AGENT NAME:	
National Party	Please print
CAMPAIGN MANAGER:	Signature Signature
	/ Please print

## POLITICAL EXPENDITURES

Candidate Name:			
Address:			
Phone Number:			
ITEM:		AMOUNT:	
		TOTAL:	
Please use another sheet of	f paper for addit	ional Contributors and Expend	ditures if necessary.
FISCAL AGENT NAME:	Chris	Hart	Signature
		n.	Please print
CAMPAIGN MANAGER:	Kath	y Mom 8m	Signature
			Please print